FEC FORM 1

Image# 29933572646

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZA	ATION		
i Orimi i	(See instruction	ons)		Office use only
NAME OF COMMITTEE (iii	n full) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Lynn Jenkins	s for Congress			
ADDRESS (number and	d street) P.O. Box 1441			
(Check if address X is changed)	ss			
	Topeka 		<u> K</u> S	66601
		CITY	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MA	AIL ADDRESS (Please provide only one e	-mail address)		
(Check if address X is changed)	pat@lynnjenkins.co	m 		
			11111	
COMMITTEE'S WEE	B PAGE ADDRESS (URL)			
(Check if address is changed)	www.lynnjenkins.co	om 		
2. DATE M 0	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		_	
3. FEC IDENTIFIC	ATION NUMBER	C C00433730		
4. IS THIS STATE	MENT NEW (N) OR	X AMENDED (A)		
I certify that I have exar	mined this Statement and to the best of my kno	owledge and belief it is true, correc	t and complete	
Type or Print Name of	of Treasurer Robert M. Telho	rst		
Signature of Treasure	er Electronically Filed by Robert M	. Telhorst	Date 0 4 M	19 / 2009
NOTE: Submission of t	false, erroneous, or incomplete information ma	ay subject the person signing this S	•	-
Office		For further information		
Use		Federal Election Comm Toll Free 800-424-953	nission	FEC FORM 1 (Revised 02/2009)